



**INSTITUTE
OF MEDICINE**

ROYAL COLLEGE OF
PHYSICIANS OF IRELAND

International Clinical Fellowship Programme

Cardiology

OUTCOME-BASED EDUCATION – OBE CURRICULUM



This ICFP Curriculum in Cardiology was reviewed in 2025 by Prof Jim Crowley and the RCPI Workplace Education Team. It is approved by the Specialist Training Committee in Cardiology and the Institute of Medicine.

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1. INTRODUCTION

This section includes information on the structure and management of this Clinical Fellowship Programme (ICFP). For specific policies and procedures, please contact your Programme Coordinator.

1.1. ICFP Overview

The International Clinical Fellowship Programme (ICFP) provides a route for overseas doctors wishing to undergo structured and advanced postgraduate medical training in Ireland. The ICFP enables suitably qualified overseas postgraduate medical Trainees to undertake a fixed period of active training in clinical services in Ireland.

The purpose of the ICFP is to enable overseas Trainees to gain access to structured training and active clinical environments, to enhance and improve the individual's medical training and learning and, in the medium to long term, the health services in their own countries.

This ICFP will allow participants to access a structured period of training and experience as developed by the Royal College of Physicians of Ireland (RCPI) to specifically meet the clinical needs of participants as defined by their home country's health service.

Core elements of all programmes include:

- Patient care that is appropriate, effective and compassionate in dealing with health problems and health promotion.
- Medical knowledge in the basic biomedical, behavioural and clinical sciences, medical ethics and medical jurisprudence and application of such knowledge in patient care.
- Interpersonal and communication skills that ensure effective information exchange with individual patients and their families and teamwork with other health professionals, the scientific community and the public.
- Appraisal and utilisation of new scientific knowledge to update and continuously improve clinical practice.
- Capability to be a scholar, contributing to development and research in the field of the chosen specialty.
- Professionalism.
- Ability to understand health care and identify and carry out system-based improvement of care.

1.2. ICFP in Cardiology

This ICFP aims to offer comprehensive training in Cardiology. The programme offers broad exposure to the clinical management of Cardiology across inpatient, outpatient, and other health settings under the appropriate supervision. The curriculum is aligned with the Royal College of Physicians of Ireland (RCPI) Higher Specialist Training (HST) in Cardiology, and reflects the principles and relevant national standards for consultant-level competence.

1.3. Training Programme Duration and Organisation of Training

The period of clinical training provided for this ICFP is 3 years.

Each post within the programme has a named trainer/educational supervisor, and programmes are under the direction of the National Specialist Directors of the relevant medical speciality.

Successful completion of this ICFP will result in the participant being issued with a formal Certificate of completion for the International Fellowship Programme by the Royal College of Physicians of Ireland. This Certificate will enable the participant's training body in their sponsoring home country to formally recognise and accredit their time spent training in Ireland.

Appointed International Fellows are:

- enrolled with RCPI and are under the supervision of a consultant doctor registered on the Specialist Division of the Register of Medical Practitioners maintained by the Irish Medical Council and who is an approved consultant trainer.
- registered on the Supervised Division of the Register of Medical Practitioners maintained by the Medical Council in Ireland.
- agreeing on a training plan with their trainers at the beginning of each training year.
- directly employed and directly paid by their sponsoring state at a rate appropriate to their training level in Ireland and benchmarked against the salary scales applicable to NCHD in Ireland.

1.4. Programme Management

- Coordination of the training programme lies with the Training Department at RCPI.
- The training year usually runs from July to July in line with National Higher Specialist Training programmes.
- Each International Fellow will be issued with a training agreement on appointment to the training programme and will be required to adhere to all policies and procedures relating to ICFP.
- Annual evaluations usually take place between April and June each year.
- International Fellows will be registered to the ePortfolio and will be expected to fulfil all requirements relating to the management of yearly training records.

1.5. ePortfolio

International Fellows will be required to keep their ePortfolio up to date and maintained throughout the programme. The ePortfolio will be countersigned as appropriate by the supervising Trainer to confirm the satisfactory fulfilment of the required training experience and the acquisition of the competencies set out in the Curriculum. This will remain the property of the International Fellow and must be produced at the End of Year Evaluation meeting. At the End of Year Evaluation, the ePortfolio will be examined. The results of any assessments and reports by the named trainer/educational supervisor, together with other material capable of confirming the Fellow's achievements, will be reviewed.

2. CORE PROFESSIONAL SKILLS

This section refers to the core professional skills that every International Fellow training in Ireland is expected to comply with. These are detailed by the Irish Medical Council as Guidelines for Good Professional Practice.

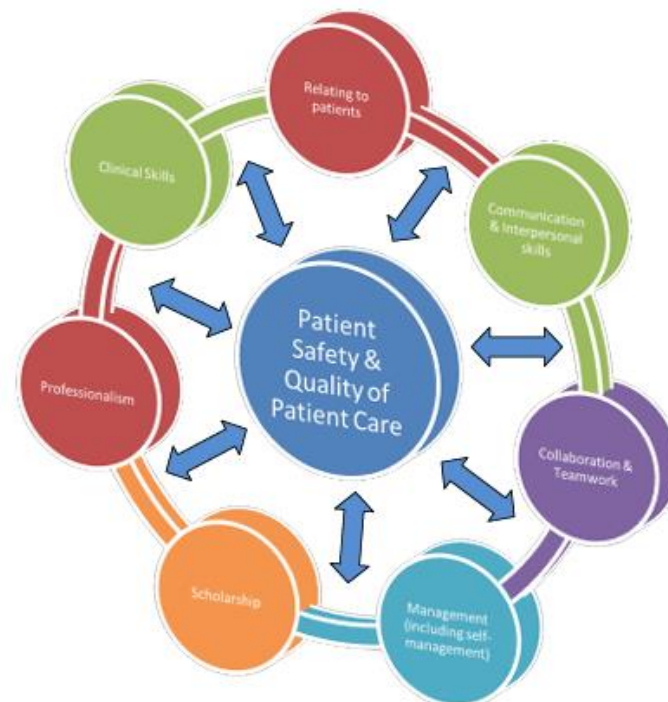
*The Medical Council has defined **eight domains of good professional practice**.*

These domains describe a framework of competencies applicable to all doctors across the continuum of professional development from formal medical education and training through to maintenance of professional competence. They describe the outcomes which doctors should strive to achieve and doctors should refer to these domains throughout the process of maintaining competence.



Comhairle na nDochtúirí Leighis
Medical Council

Eight Domains of Good Professional Practice as devised by Medical Council



3. SPECIALTY SECTION - Training Goals in Cardiology

This section includes the Specialty Training Goals that the International Fellow should achieve by the end of the ICFP.

Each Training Goal is broken down into specific and measurable training outcomes. Per each training outcome, International Fellows can record workplace-based assessments (DOPS, MiniCEX, CBD) and Feedback Opportunity on ePortfolio.

Specialty Training Goals

Training Goal 1.

Coronary Disease and Intervention

Training Goal 2.

Imaging

Training Goal 3.

Rhythm Disorders

Training Goal 4.

Heart Failure

Training Goal 5.

Prevention, Community, and Pregnancy

Training Goal 1 – Coronary Disease and Intervention

By the end of this Fellowship, the International Fellow is expected to assess, investigate, and manage a patient with known or suspected coronary and structural heart disease in a manner appropriate to the complexity of the patient.

OUTCOME 1 – PERFORM ASSESSMENT OF PATIENT WITH SYMPTOMS OF CORONARY HEART DISEASE

For the International Fellow to demonstrate proficiency in the assessment of a patient with symptoms suggestive of coronary artery disease (early stage of training).

OUTCOME 2 – MANAGEMENT OF PATIENTS WITH ACUTE CORONARY SYNDROME

For the International Fellow to demonstrate proficiency in the management of a patient with acute coronary syndrome (early stage of training).

OUTCOME 3 – MANAGEMENT OF PATIENTS WITH CHRONIC CORONARY SYNDROME

For the International Fellow to demonstrate proficiency in the management of a patient with chronic coronary syndrome (early stage of training).

OUTCOME 4 – ASSESSMENT OF A PATIENT USING CORONARY ANGIOGRAPHY

For the International Fellow to demonstrate proficiency in the assessment of a patient using coronary angiography (late stage of training).

OUTCOME 5 – KNOWLEDGE OF STRUCTURAL HEART DISEASE INTERVENTION

For the International Fellow to demonstrate knowledge of structural heart disease intervention (late stage of training).

Training Goal 2 – Imaging

By the end of this Fellowship, the International Fellow is expected to select and interpret the appropriate cardiac imaging modalities relevant to the clinical scenario.

OUTCOME 1 – ASSESSING A PATIENT USING MULTIPLE IMAGING MODALITIES

For the International Fellow to demonstrate proficiency in assessing a patient using multiple imaging modalities including Echo, CT, CMR, and Nuclear (late stage of training).

OUTCOME 2 – MANAGE PATIENTS WITH VALVULAR HEART DISEASE

For the International Fellow to demonstrate proficiency in managing a patient with valvular heart disease.

OUTCOME 3 – MANAGE PATIENTS WITH CONGENITAL HEART DISEASE

For the International Fellow to demonstrate proficiency in managing a patient with congenital heart disease.

OUTCOME 4 – MANAGE PATIENTS WITH ENDOCARDITIS

For the International Fellow demonstrate proficiency in managing a patient with endocarditis.

OUTCOME 5 – MANAGE PATIENTS WITH CARDIAC TUMOUR

For the International Fellow to demonstrate proficiency in managing a patient with cardiac tumour.

OUTCOME 6 – DIAGNOSIS AND MANAGEMENT OF DISEASES OF THE AORTA

For the International Fellow to demonstrate proficiency in diagnosis and management of diseases of the aorta.

OUTCOME 7 – ASSESSMENT OF PATIENTS USING TRANSOESOPHAGEAL ECHO

For the International Fellow to demonstrate proficiency in the assessment of a patient using transoesophageal echo.

Training Goal 3 – Rhythm Disorders

By the end of this Fellowship, the International Fellow is expected to assess, investigate, and manage a patient with known or suspected rhythm disorders in a manner appropriate to the complexity of the patient.

OUTCOME 1 – ASSESSING A PATIENT USING ECG, HOLTER, AND EST

For the International Fellow to demonstrate proficiency in assessing a patient using ECG, Holter, and EST.

OUTCOME 2 – ASSESSING AND MANAGING PATIENTS WITH ATRIAL ARRHYTHMIAS

For the International Fellow to demonstrate proficiency in assessing and managing patients with atrial arrhythmias.

OUTCOME 3 – ASSESSING AND MANAGING PATIENTS WITH VENTRICULAR ARRHYTHMIAS

For the International Fellow to demonstrate proficiency in assessing and managing patients with ventricular arrhythmias.

OUTCOME 4 – PARTICIPATE IN IMPLANTATION OF AND BE PROFICIENT IN FOLLOW-UP OF CARDIAC DEVICES

For the International Fellow to understand indications for, participate in implantation of and be proficient in follow-up of cardiac devices.

OUTCOME 5 – UNDERSTAND INDICATIONS FOR AND OBSERVE CATHETER ABLATION OF CARDIAC ARRHYTHMIAS

For the International Fellow to understand indications for and observe catheter ablation of cardiac arrhythmias.

OUTCOME 6 – MANAGING PATIENTS WITH INHERITED CARDIAC DISEASE INCLUDING KNOWLEDGE OF CARDIAC GENETICS

For the International Fellow to demonstrate proficiency in managing a patient with an inherited cardiac disease including knowledge of cardiac genetics.

OUTCOME 7 – UNDERSTAND THE CAUSES AND MANAGEMENT OF SYNCOPE

For the International Fellow to understand the causes and management of syncope.

Training Goal 4 – Heart Failure

By the end of this Fellowship, the International Fellow is expected to assess, investigate, and manage a patient with known or suspected myocardial and pericardial disease in a manner appropriate to the complexity of the patient.

OUTCOME 1 – ASSESSING AND MANAGING PATIENTS WITH ACUTE HEART FAILURE

For the International Fellow to demonstrate proficiency in assessing and managing a patient with acute heart failure.

OUTCOME 2 – ASSESSING AND MANAGING PATIENTS WITH CHRONIC HEART FAILURE

For the International Fellow to demonstrate proficiency in assessing and managing a patient with chronic heart failure.

OUTCOME 3 – ASSESSING AND MANAGING PATIENTS WITH ADVANCED HEART FAILURE

For the International Fellow to demonstrate proficiency in assessing and managing a patient with advanced heart failure.

OUTCOME 4 – ASSESSING AND MANAGING PATIENTS WITH MYOCARDIAL OR PERICARDIAL DISEASE

For the International Fellow to demonstrate proficiency in assessing and managing a patient with myocardial or pericardial disease including cardiac tamponade.

OUTCOME 5 – ASSESSING AND MANAGING PATIENTS WITH PULMONARY ARTERIAL HYPERTENSION

For the International Fellow to demonstrate proficiency in assessing and managing a patient with Pulmonary arterial hypertension.

OUTCOME 6 – ASSESSING AND MANAGING CARDIO-ONCOLOGY PATIENTS

For the International Fellow to demonstrate proficiency in assessing and managing cardio-oncology patients.

Training Goal 5 – Prevention, Community, and Pregnancy

By the end of this Fellowship, the International Fellow is expected to assess, investigate, and manage a patient with cardiovascular risk factors in a manner appropriate to the complexity of the patient.

OUTCOME 1 – ASSESSING AND MANAGING PATIENTS WITH HYPERTENSION

For the International Fellow to demonstrate proficiency in assessing and managing a patient with Hypertension.

OUTCOME 2 – ASSESSING AND MANAGING PATIENTS WITH DYSLIPIDAEMIA

For the International Fellow to demonstrate proficiency in assessing and managing a patient with Dyslipidaemia.

OUTCOME 3 – GAIN EXPERIENCE IN ASSESSING HEART DISEASE IN PREGNANCY

For the International Fellow to gain experience in assessing heart disease in pregnancy.

OUTCOME 4 – GAIN EXPERIENCE IN CARDIAC REHABILITATION

For the International Fellow to gain experience in cardiac rehabilitation.

OUTCOME 5 – GAIN EXPERIENCE IN MANAGING PATIENTS IN A COMMUNITY

For the International Fellow to gain experience in managing cardiac patients in a community setting.

4. COMPLEMENTARY TRAINING AND EDUCATIONAL ACTIVITIES

4.1. Training Activities

The International Fellow is expected to participate in different Training Activities in a variety of settings, such as Outpatient Clinics; Ward Rounds; Consultations; Emergencies/Complicated Cases; Grand Rounds; Multidisciplinary Team Meetings; Clinical Audits;

Specific requirements for this ICFP are outlined in the final section of this document ([Summary Table of Expected Experience](#)).

4.2. Educational Activities

The International Fellow will also be invited to attend all **Gastroenterology Study Days** and could be eligible to complete the **HST Taught Programme in Gastroenterology**.

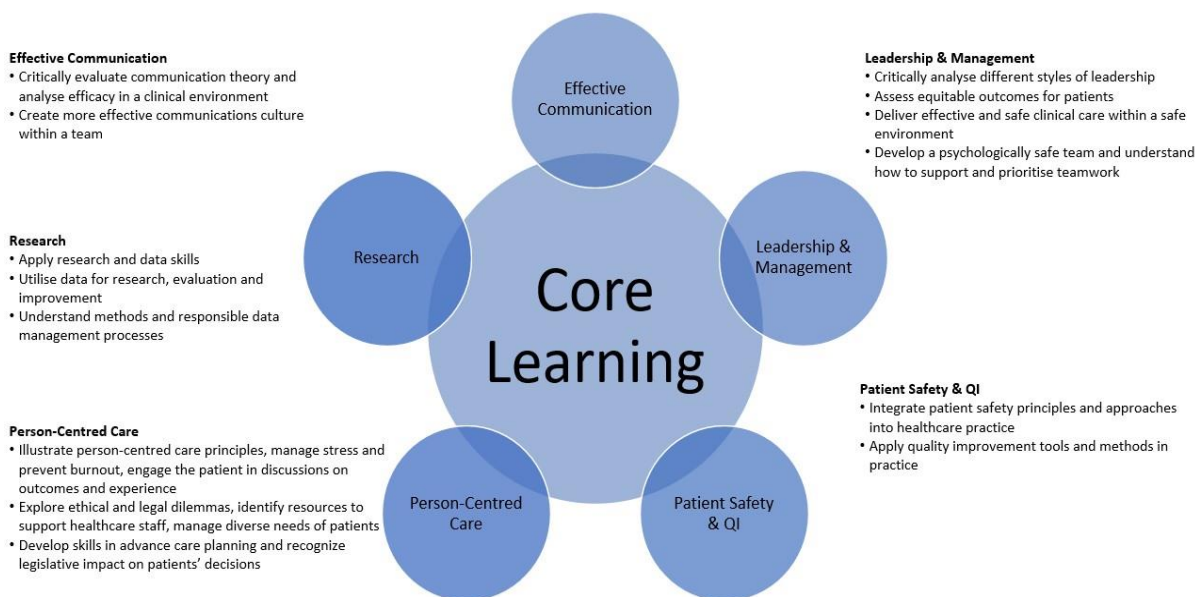
The RCPI Taught Programme consists of a series of modular elements. Content delivery is a combination of self-paced online material, live virtual tutorials, and in-person workshops, all accessible in one area on the RCPI's virtual learning environment (VLE), RCPI Brightspace.

The live virtual tutorials are delivered by Tutors related to the Institute of Medicine and they will use specialty-specific examples throughout each tutorial.

International Fellows can be assigned to a tutorial group with the HST Trainees from Institute of Medicine starting in July.

The assigned supervisor/clinical lead determines whether it is appropriate for the International Fellow to attend the Taught Programme or portions of it.

The diagram below illustrates the content covered by the Taught Programme.



5. ASSESSMENT GUIDELINES

The progression of the International Fellow throughout the programme is monitored and evaluated making use of both formative and summative assessments.

Formative Assessment

- Focuses on continuous feedback and developmental growth.
- Includes multiple opportunities for reflection, discussions, and skill evaluations throughout the training period.
- Helps identify areas for improvement and supports ongoing learning.

Summative Assessment

- Provides a final judgment of competency at various stages of training.
- Involves formal evaluations and workplace-based assessments.
- Used to assess whether the trainee meets the necessary standards to progress in training or achieve certification (e.g. examination).

WBAs in use at RCPI

Workplace-based assessments (WBAs) refer to those assessments used to evaluate Trainees' daily clinical practices employed in their work setting. These are primarily based on the observation of Trainees' performance by Trainers.

RCPI employs a variety of WBAs with different focuses:

- Observation of clinical practice: this can be evaluated using structured assessments such as via MiniCEX and DOPS.
- Discussion of clinical cases: this can be formally evaluated via Case Based Discussion (CBD) and it is mostly used to assess clinical judgment and decision-making.
- Informal Feedback: this can be gathered by different trainers, colleagues and recorded via Feedback Opportunity Form available on ePortfolio.
- Mandatory Evaluations: these are bound to specific events or times of the academic year. For these at RCPI we use the Quarterly Assessment/End of Post Assessment and End of Year Evaluation.

Recording WBAs on ePortfolio

It is expected that WBAs are logged on an electronic portfolio. Every International Fellow has access to an individual ePortfolio where they must record all their assessments, including WBAs. By recording assessments on this platform, ePortfolio serves both the function to provide an individual record of the assessments and to track International Fellows' progression.

Below is a table of all the assessments available for this ICFP and a brief explanation of each.

WORKPLACE-BASED ASSESSMENTS	
CBD Case Based Discussion	<p>This assessment is developed in three phases:</p> <ol style="list-style-type: none"> 1. Planning: The International Fellow selects two or more medical records to present to the Trainer who will choose one for the assessment. International Fellow and Trainer identify one or more training goals in the curriculum and specific outcomes related to the case. Then the Trainer prepares the questions for discussion. 2. Discussion: Prevalently, based on the chosen case, the Trainer verifies the International Fellow's clinical reasoning and professional judgment, determining the International Fellow's diagnostic, decision-making and management skills. 3. Feedback: The Trainer provides constructive feedback to the International Fellow. It is good practice to complete at least one CBD per quarter in each year of training.
DOPS Direct Observation of Procedural Skills	<p>This assessment is specifically targeted at the evaluation of procedural skills involving patients in a single encounter.</p> <p>In the context of a DOPS, the Trainer evaluates the International Fellow while they are performing a procedure as a part of their clinical routine. This evaluation is assessed by completing a form with pre-set criteria, then followed by direct feedback.</p>
MiniCEX Mini Clinical Examination Exercise	<p>The Trainer is required to observe and assess the interaction between the International Fellow and a patient. This assessment is developed in three phases:</p> <ol style="list-style-type: none"> 1. The International Fellow is expected to conduct a history taking and/or a physical examination of the patient within a standard timeframe (15 minutes). 2. The International Fellow is then expected to suggest a diagnosis and management plan for the patient based on the history/examination. 3. The Trainer assesses the overall International Fellow's performance by using the structured ePortfolio form and provides constructive feedback.
Feedback Opportunity	<p>Designed to record as much feedback as possible. It is based on observation of the International Fellows in any clinical and/or non-clinical task. Feedback can be provided by anyone observing the International Fellow (peer, other supervisors, healthcare staff, juniors). It is possible to turn the feedback into an assessment (CDB, DOPS or MiniCEX)</p>
MANDATORY EVALUATIONS	
QA Quarterly Assessment	<p>As the name suggests, the Quarterly Assessment recurs four times in the academic year, once every academic quarter (every three months).</p> <p>It frequently happens that a Quarterly Assessment coincides with the end of a post, in which case the Quarterly Assessment will be substituted by completing an End of Post Assessment. In this sense the two Assessments are interchangeable, and they can be completed using the same form on ePortfolio.</p>
EOPA End of Post Assessment	<p>However, if the International Fellow will remain in the same post at the end of the quarter, it will be necessary to complete a Quarterly Assessment. Similarly, if the end of a post does not coincide with the end of a quarter, it will be necessary to complete an End of Post Assessment to assess the end of a post.</p> <p>This means that for every specialty and level of training, a minimum of four Quarterly Assessment and/or End of Post Assessment will be completed in an academic year as a mandatory requirement.</p>
EOYE End of Year Evaluation	<p>The End of Year Evaluation occurs once a year and involves the attendance of an evaluation panel composed of the National Specialty Directors (NSDs); the Specialty Coordinator attends too, to keep records of and facilitate the meeting. The assigned Trainer is not supposed to attend this meeting unless there is a valid reason to do so. These meetings are scheduled by the respective Specialty Coordinators and happen sometime before the end of the academic year (between April and June).</p>

6. SUMMARY TABLE OF EXPECTED EXPERIENCE

This table offers a blueprint of all the activities that are part of this ICFP, it summarises the type and frequency of the expected experience that should be completed and then recorded on the ePortfolio.

Experience Type	Required/ Desirable	Expected Frequency
Training Plan		
Personal Goals Plan (Copy of agreed Training Plan for the module signed by both International Fellow & Trainer at the beginning of the Training year)	Required	1 per year
Sample of Weekly Timetable (per post)	Required	1 per post
Training Activities		
Clinics		
General Cardiology	Required	2 per week
Subspecialty Cardiology clinics including but not limited to: Arrhythmia Inherited cardiac conditions Structural Clinic Adult Congenital Heart disease High-risk pregnancy Cardio-oncology Hypertension Dyslipidaemia	Required	1 per month
Ward Consultations		
Consultant-Led	Required	1 per week
Fellow-Led	Required	1 per week
Consultations	Required	1 per week
Procedures		
Temporary Pacing Wire	Required	10 per programme
Transoesophageal Echo	Required	75 per programme
Right Heart Catheterisation	Required	20 per programme
Exercise ECGs (analyse)	Required	100 per year
Holter ECGs (analyse)	Required	100 per year
Echocardiography (review)	Required	250 per programme
Electrophysiology Studies/Catheter ablations (observed)	Required	15 per programme
PCI (observed)	Required	100 per programme
Permanent Cardiac Pacing (observed)	Required	20 per programme
Coronary Angiography (performed)	Required	200 per programme
Defib and BiVent implants (observed)	Required	20 per programme
Cardiac CT (interpretation)	Required	50 per programme

Experience Type	Required/ Desirable	Expected Frequency
Cardiac MRI (interpretation)	Required	50 per programme
Cases Experience		
Diagnosis of nature of problem and its presentation, emergency case for investigation		1 per year
Chronic Cases/Long term care		1 per year
ICU/CCU Cases		1 per year
Educational Activities		
In-house activities***		
Grand Rounds	Required	1 monthly
Journal Clubs	Required	2 monthly
MDT Meeting	Required	1 weekly
Cardiology Meeting	Required	1 weekly
Seminar	Required	2 annually
Lecture	Required	2 annually
Formal Teaching Activity (1 per month)		
Lecture	Required	Ad hoc
RCPI Taught Programme	Required	1 per quarter
Research	Desirable	1 per programme
Clinical Audit activities and reporting	Required	1 per year
Publications	Desirable	2 per programme
Presentations	Desirable	1 per year
National/International meetings	Required	1-2 per year
Assessments and Evaluations		
Workplace Based Assessments (WBAs)		
Case Based Discussion	Required	4 per year as agreed with trainer
Mini-CEX	Required	2 per year as agreed with trainer
DOPS	Required	2 per year as agreed with trainer
Feedback Opportunity	Required	As required
Examinations		
<ul style="list-style-type: none"> ○ European Society of Cardiology Examination (ESC) in Year 3 or 4 of HST ○ EACVI or BSE or ASE ○ EAPCI ○ EHRA CP ○ EHRA EP 	Optional	
Mandatory Evaluations		
Quarterly Assessment (1 every 3 months)	Required	4 per year

Experience Type	Required/ Desirable	Expected Frequency
End of Year Evaluation	Required	1 per year